	PA	TENT APP	-ICATI	no persons are ro	I EKMINY İ I	io io a conection	I OI IDI	formation un	less it disp	DEPARTMENT plays avalid OME ration or Docket I	3 control numb
-		·	Subs	stitute for Form	PTO-875				10	1750	8895
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
-	FOR ASIC FEE	NUI	NUMBER FILED		NUMBER EXTRA		E	FEE	7	RATE	FEE
(37 CFR 1.16(a))					·			5	OR		s
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 =		•		=		OR	X \$=	
	DEPENDENT CLA 7 CFR 1.16(b))	IMS .	· minus 3 = •			X \$	=		OR	x \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	_	,	OR		
. 11	If the difference in column 1 is less than zero, enter "0" in column 2.								1	+\$=	
		CLAIMS AS A			2.	TOTA	٠ I		OR	TOTAL	L
		LAINIS AS A	MENDE	D-PARI II							
_	(Column 1)			(Column 2) (Column 3)		SMA	LLE	NTITY	OR -		R THAN ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	\dashv	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	25	Minus	25	= /	x s 25	=		OR.	× 50 =	
	(37 CFR 1.16(b))	3	Minus	3	=	x s 100)=		OR.	x , 200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ 180	_		OR	+;360=	
				· · · · · · · · · · · · · · · · · · ·		TOTAL ADD'L FE			OR	TOTAL	
		(Column 1)		(Column 2)	(Column 3)	700 C FE	۲ ۲		UK	ADD'L FEE	
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus		=	x s 25	=		OR	× \$50 =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$ 100	_		OR	× \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ 180 :			OR	+ =360 =	
					* - *	TOTAL ADD'L FEE	\neg		OR L	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)		•				·
AIMENDIMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	T	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	•	Minus	**	= -	x \$25 =			_ F	× \$ 50 =	FEE
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$ 100 =	\neg			x s 200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))										
				(5. 01)	\	+ \$ 180 =				+ \$360 =	•
	If the entry in col	lumn 1 is less tha	n the entn	rin column 2 write	"O" in anti 2	ADD'L FEE			OR .	ADD'L FEE	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.